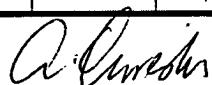


<b>Issue Classification</b>				Application/Control No.		Applicant(s)/Patent under Reexamination	
				10/718,947		OPRESCU-SURCOBE ET AL.	
				Examiner		Art Unit	
				Afsar M. Qureshi		2616	

ORIGINAL				CROSS REFERENCE(S)			
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
370	329	370	252	337	347		
INTERNATIONAL CLASSIFICATION		455	437	450			
H	0	4	J	1/16			
H	0	4	Q	7/00			
			/				
			/				
			/				
 <b>AFSAR QURESHI</b> <b>PRIMARY EXAMINER</b>				Total Claims Allowed: 18			
(Assistant Examiner) (Date)				(Primary Examiner) <i>1/18/08</i> (Date)			
(Legal Instruments Examiner) (Date)				O.G. Print Claim(s)		O.G. Print Fig.	
1		5					

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1	11	31	61	91	121	151
	2		32	62	92	122	152
	3		33	63	93	123	153
2	4		34	64	94	124	154
3	5		35	65	95	125	155
	6		36	66	96	126	156
4	7		37	67	97	127	157
	8		38	68	98	128	158
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	10	13	40	70	100	130	160
5	11	14	41	71	101	131	161
	12		42	72	102	132	162
6	13		43	73	103	133	163
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8	16		46	76	106	136	166
	17		47	77	107	137	167
9	18	15	48	78	108	138	168
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	20	17	50	80	110	140	170
	21	18	51	81	111	141	171
	22		52	82	112	142	172
	23		53	83	113	143	173
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	25		55	85	115	145	175
	26		56	86	116	146	176
	27		57	87	117	147	177
	28		58	88	118	148	178
	29		59	89	119	149	179
	30		60	90	120	150	180

<b>Issue Classification</b>	Application/Control No.	Applicant(s)/Patent under Reexamination
	10/718,947	OPRESCU-SURCOBE ET AL.
Examiner	Art Unit	
Afsar M. Qureshi	2616	

ORIGINAL		CROSS REFERENCE(S)						
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
370	329	370	252	337	347			
INTERNATIONAL CLASSIFICATION		455	437	450				
H	0	4	J	1/16				
H	0	4	Q	7/00				
			/					
			/					
			/					
<i>A. Qureshi</i>								
(Assistant Examiner) (Date)		AFSAR QURESHI PRIMARY EXAMINER					Total Claims Allowed: 20	
<i>S. Bhatia</i> (Legal Instruments Examiner) (Date)		(Primary Examiner) (Date)		8/25/06		O.G. Print Claim(s)	O.G. Print Fig.	
						1	5	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1	12	31	61	91	121	151
2	2		32	62	92	122	152
3	3		33	63	93	123	153
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3	5		35	65	95	125	155
6	6		36	66	96	126	156
4	7		37	67	97	127	157
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12			42	72	102	132	162
6	13		43	73	103	133	163
14			44	74	104	134	164
7	15		45	75	105	135	165
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9	18	17	48	78	108	138	168
19		18	49	79	109	139	169
20		19	50	80	110	140	170
21		20	51	81	111	141	171
22			52	82	112	142	172
23			53	83	113	143	173
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11	25		55	85	115	145	175
26			56	86	116	146	176
27			57	87	117	147	177
28			58	88	118	148	178
29			59	89	119	149	179
30			60	90	120	150	180